

Volume 4 | Issue 7 | July 2020

July Broker Blast

UnitedHealthcare New Jersey Health Plan



General Updates

Sweat Equity Program during COVID-19

Eligible members may continue their participation in the Sweat Equity program. To help make participation easier during this time when many gyms have closed and organized in-person fitness classes and events have been canceled, beginning March 1, 2020 through the end of your state's declared emergency, members may record their home-based exercise activities (one per day: virtual fitness (app, video), walk, run, bike ride, home workout equipment, etc.) on their Sweat Equity reimbursement form.

We are temporarily waiving the following program requirements, which would not apply to home-based exercise activities:

- submission of documentation supporting the cardio benefits of the equipment, class, facility or event used by the member;
- · receipts for fitness-related expenses incurred;
- facility/instructor attestation as a qualification for reimbursement of eligible exercise-related expenses.

When recording home-based workouts on the reimbursement application (claim form):

- Under Fitness Events, Facility Visits and Classes, indicate "home" for Session Type or leave blank;
- Under Fitness Event, Class, Session, Facility Information, indicate "home" for Organization name or leave blank:
- Under Fitness Facility/Instructor Information, indicate "home" for Facility employee/Class instructor name or leave blank.

All other program requirements will continue to apply.

COVID-19 Renewal Details for groups of 2-499 eligible employees

- Groups renewing from May 1 through September 30, 2020 will renew at existing rates without rate increases.
 - Renewals occurring May through July 31, 2020 may require retro-active adjustments and customers may see a lower rate on their monthly invoice than what was reflected in their renewal.
- Products in-scope for this short term COVID-19 renewal adjustment are fully insured Dental, Vision, Basic Life, Supplemental Life, STD and LTD, and Supplemental Health (Critical Illness, Accident, Hospital Indemnity).*
- This Includes the UnitedHealthcare and All Savers businesses
- State regulatory guidelines may apply.*
- *WA groups in the 2-50 space will be subject to standard renewal rate strategy for Dental & Vision
- *FL groups in the 2-100 space will be subject to standard renewal rate strategy for STD and LTD
- *Supplemental Health (Critical Illness, Accident, Hospital Indemnity) available for groups of 51+ employees

Want to learn more about what
UnitedHealthcare is doing for COVID-19?
Employer FAQ
Broker FAQ
Consultant FAQ
UHC COVID-19 Updates



General Updates

Employee layoffs or terminations? Share more about individual coverage options

These are unprecedented times, and laying off or terminating employees can be among the most difficult decisions a business makes.

UnitedHealthcare has launched an initiative to help you connect employees in this situation to the information and support they need to learn about their options, including ACA Exchange plans, Medicare and Medicaid plans, short term limited duration insurance plans and more.

Simply by calling the **toll-free hotline at 1-844-638-9785**, your employees will be able to speak to a licensed insurance agent who can conduct a comprehensive needs analysis and help them find the coverage solutions that may be right for them based on their specific needs.

We've made it easy for you to share more information with your employees

You can connect employees to this toll-free hotline and information about individual coverage options by sharing these resources:

Individual Coverage Options Email (docx)

Send to employees following layoff or termination.

Individual Coverage Options Letter (docx)

Attach to email (above) or send via mail to employees following layoff or termination.

Individual Coverage Options Flier (pdf)

Attach to email (above) or include with letter (above).

To learn more and find coverage that's right for you, visit **getcovered.com**. For more information on individual coverage and other frequently asked questions on COVID-19, visit our regularly updated FAQ page on **uhc.com**. Please contact your broker or UnitedHealthcare representative for more information.

SBC Alternative Notices

Based on federal guidance, insurers and health plans are required to provide members with a notice of temporary changes to plan benefits due to the COVID-19 national emergency. Because the changes are temporary, this notice replaces the requirement for insurers or health plans to update their Certificate of Coverage, Summary Plan Description, or Summary of Benefits and Coverage (SBC) via a Summary of Material Modification, SMU or a new SBC.

Please note that FI UHC SBC notices went out the end of June. Oxford will contact its customers via robocalls and post on the portal.

Please find the attached notice.



General Updates

COVID-19 Testing

During the COVID-19 national public health emergency period, UnitedHealthcare will cover medically necessary COVID-19 virus detection and antibody testing and test-related visits at no cost-share through July 24 when ordered by a physician or appropriately licensed health care professional for purposes of diagnosis or treatment of an individual member.

Tests must be FDA authorized to be covered without cost-sharing (i.e., copayment, coinsurance or deductible). U.S. Food and Drug Administration (FDA)-authorized tests include:

- •Tests approved for patient use through pre-market approval or emergency-use pathways; and
- •Tests developed and administered in accordance with FDA specifications or through state regulatory approval.

UnitedHealthcare will cover FDA-approved rapid point-of-care virus detection and antibody testing.

COVID-19 treatment

UnitedHealthcare will waive member cost-sharing for the treatment of COVID-19 through July 24. The company will also work with self-funded (ASO) customers that implemented a similar approach.

Designated telehealth and Virtual Visits

Members of fully insured plans or ASO plans that elected to opt in to the standard fully insured approach can access audio and video telehealth services through their own choice of network physician without cost-share (i.e., copayment, deductible or coinsurance) through Sept. 30.

During this same time, a Virtual Visit offered through one of UnitedHealthcare's designated providers will also be covered at no cost-share.

This includes high-deductible health plans and health savings account plans.

Note: This applies to both COVID-19 and non-COVID-19-covered services.

All plans have access to telehealth for COVID-19 services through the emergency period.

Get Your Flu Shot

The anticipation of a second wave of CoVID-19 has resulted in an unprecedented demand for seasonal flu shots. While we realize planning fall flu shots may be far from your mind as you strategize how to get employees back to work, failing to lock in your event now may result in you not getting your preferred date.

Please see the attached brochure with information on setting up on-site flu shot clinics. Please reach out to your Account Manager if you have additional questions.



National strategies to help ensure a safer and healthier return to the worksite

Employers should consider a number of priorities as they plan the transition of operations back to the worksite — from understanding state and federal health policy guidelines to effectively communicating with employees before, during and after the transition. And, while each worksite is likely to present different challenges, there are 7 priorities to consider that may help ensure a safer and healthier experience for those involved.

UnitedHealthcare has developed these comprehensive resources to help businesses make well-informed decisions related to returning to worksite:

- •The <u>detailed brochure (pdf)</u> to the right outlines 7 priorities employers can use to build a plan for a safer and healthier return to the worksite.
- •This <u>one-page overview (pdf)</u> of the 7 priorities provides an at-a-glance view of these important actions employers can take.

Please reach out to your UnitedHealthcare representative with any questions

2020 Real Appeal Info Session webcast schedule available

The Real Appeal® Info Session webcast schedule for the remainder of 2020 is now available. UnitedHealthcare fully insured and All Savers customers, brokers, and Account Management teams are invited to attend to learn more about the digital weight-loss program. As a reminder, Real Appeal is now available to All Savers policies.

New information presented in 2020 Real Appeal Info Sessions

Participants are strongly encouraged to attend a 2020 session even if they attended a session in the past; the 2020 sessions feature new information about the program, including best practices for launch to drive maximum employee enrollment and how to register on the Real Appeal employer site (engage.realappeal.com) to start an automated email campaign that can help achieve employee enrollment rates of over 20%!

The webcasts will also cover how Real Appeal helps members lose weight through personalized coaching and engaging digital tools that may lead to behavior change and scalable disease prevention. Additionally, they will showcase weight-loss and cost-savings achieved to date.

Real Appeal Info Session webcast schedule – For customers

| Date | Time | Registration link |
|-------------------|-------------------|-------------------|
| Tuesday, Sept. 29 | 2 to 2:45 p.m. ET | Register |

Real Appeal Info Session webcast schedule - For brokers and Account Management

| Date | Time | Registration link |
|------------------|-------------------|-------------------|
| Thursday, Oct. 1 | 2 to 2:45 p.m. ET | <u>Register</u> |

Real Appeal client support team assistance

The Real Appeal client support team is available to answer any questions about the program and launch process for customers. Contact engage.support@realappeal.com or call 844-944-REAL (7325).



Oxford Enhancements

UnitedHealthcare has rolled out Oxford enhancements to its NJ/NY sitused group that renew effective 10/1/19 and later for New York (100+) and New Jersey (51+). We will also begin implementing these enhancements beginning 5/1/2020for our Oxford fully insured small group business in New York (1-100) and New Jersey (1-50).

Below is a sample of the verbiage/attachments SAE's will be releasing to our brokers along with the renewal.

We value our relationship with brokers and clients. Because of that we are continually working to improve service and make Oxford their top choice for health care for their employees.

We're now able to enhance members' experience with their Oxford benefits by providing a new advocacy customer service model, additional value-added features and a new member website. These enhancements will go into effect upon your client's new Oxford policy effective date. So for *ABC Company* this will be in conjunction with the upcoming renewal. Please share this great news with *ABC Company*.

Along with these enhancements, your client will receive a new Group ID and Plan Identifier (ID), formerly known as Contract Specific Package (CSP). We will supply that information to you before your client's new policy effective date. Please find attached the enhancement package that details what your client and their employees can expect as a result of these enhancements.

Please be advised that Oxford will be issuing new ID cards on the 15th of the month prior to the groups renewal date. This will ensure all members are receiving ID cards timely with their new ID numbers. Please be advised if the groups renewal is not received & processed by the 15th then members may not receive ID cards reflecting any plan changes. If this does occur, ID cards reflecting plan changes will be triggered once the groups renewal is processed.

Included are the following attachments:

- Oxford Enhancements: Employer Overview
- Oxford Enhancements: Employer Actions
- Oxford Enhancements: Frequently Asked Questions
- Oxford Enhancements: Employer Letter
- Oxford Enhancements: Employee Letter

Oxford 2.0 Enhancements will be effective 1/1/2020 for ABC Company.

- a. New website and medical cards for members www.myuhc.com
- b. Virtual Visits Telemedicine
- c. Real Appeal
- d. Advocate for Me model (Note there will be new medical cards mailed out to members due to a new member service line)

We strongly believe UnitedHealthcare is positioned to deliver the best health care coverage value for *ABC Company*. We are committed to delivering practical yet innovative solutions that meet their specific needs and will result in healthier employees and better cost management.

Thank you and please let us know if you have any questions.



Explore the 2021 HSA Deductibles and Contribution Limits.

The Internal Revenue Service (IRS) has announced the inflation-adjusted 2021 minimum deductibles, out-of-pocket maximums and contribution limits for health savings accounts (HSAs) and qualified high deductible health plans (HDHPs). The IRS changes are effective on the employers' effective or renewal date beginning Jan. 1, 2021, or later.

"Self-only coverage" refers to plans for one individual, while "family coverage" refers to plans for two or more individuals. The out-of-pocket maximum includes copayments, deductibles and coinsurance amounts, and excludes premiums.

2021 limits for high deductible health plans (HDHP) with health savings accounts (HSA)

Minimum deductible

- \$1,400 for self-only coverage (no change from 2020)
- \$2,800 for family coverage (no change from 2020)
- \$2,800 for embedded individual deductible (no change from 2020)

Out-of-pocket maximum

- **\$7,000** for self-only coverage (\$100 increase from 2020)
- **\$14,000** for family coverage (\$200 increase from 2020)
- Please watch for the intersection of HSA and Affordable Care Act (ACA) rules. The 2021 ACA maximum is \$8,550 for individual coverage (\$8,150 in 2020).
- Examples of compliant HSA/ACA plans:
 - If you have one plan for self-only and family and have an embedded out-of-pocket, the maximum amounts for 2021 are \$7,000 for individuals and \$14,000 for families.
 - If you have one plan for self-only and family and have a non-embedded out-of-pocket, the maximum amounts for 2021 are \$7,000 for individuals and \$8,550 for families.

HSA contribution limits

- **\$3,600** for self-only coverage (\$50 increase from 2020)
- **\$7,200** for family coverage (\$100 increase from 2020)
- The annual "catch-up" contribution amount for individuals age 55 or older will remain \$1,000.

2021 Maximum Out-of-Pocket Limits for Group Plans

2021 Maximum out-of-pocket limit for Group Plans

- \$8,550 for self-only coverage (\$8,150 in 2020)
- \$17,100 for family coverage (\$16,300 in 2020)

The annual out-of-pocket maximum requirement does not apply to transitional relief and retiree only plans.

For questions discuss with your UnitedHealthcare representative.



PCORI extended additional 10 years; PCORI fees due July 31

The Patient-Centered Outcomes Research Institute (PCORI) fee helps fund research that evaluates and compares health outcomes, clinical effectiveness, and risks and benefits of medical treatments and services. The fee, effective 2012-2029, is treated like an excise tax by the Internal Revenue Service (IRS).

- For plan and policy years that end on or after Oct. 1, 2019, and before Oct. 1, 2020, the PCORI Fee is \$2.54 per covered life.
- For plan and policy years that end on or after Oct. 1, 2018, and before Oct. 1, 2019, the PCORI fee is \$2.45 per covered life.

PCORI fees were originally scheduled to be discontinued for plan years ending on or after Oct. 1, 2019, but Congress extended the fees for 10 additional years. The final PCORI fees will be due by July 31, 2030, unless extended again.

Relief for policy or plan years that end on or after Oct. 1, 2019, and before Oct. 1, 2020

In Notice 2020-44, the IRS provides the following relief for calculating covered lives because Congress extended the PCORI fee in December 2019, and issuers and plan sponsors may not have anticipated the need to continue counting covered lives this year:

- Issuers of applicable health insurance policies
 - Consistent with prior years, may use one of four available counting methods:
 - Actual count method,
 - Snapshot method,
 - Member months method, or
 - · State form method: and
 - "Use any reasonable method to calculate the average number of covered lives" if they use the same method for the entire year and across all policies for which they report a liability on Form 720 for that year.
- Self-funded (ASO) plan sponsors
 - Consistent with prior years, may use one of three available counting methods:
 - Actual count method,
 - · Snapshot method, or
 - Form 5500 method; and
 - "Use any reasonable method to calculate the average number of covered lives" if they use the same method for the entire year.

Submitting the report to the IRS

- **ASO groups:** Employers and plan sponsors are responsible for submitting <u>IRS Form 720</u> and paying the PCORI fee by July 31. Instructions for completing the form are available on the IRS website.
 - As a reminder, the <u>PCORI fee</u> is assessed on all covered lives including employees, retirees, spouses and dependents.
 - The membership report from Employer eServices® may assist in the PCORI calculation.
- All Savers® groups: All Savers posts the employer group's membership information to the employer website. The employer group is required to complete and file the IRS Form 720. For general questions, contact All Savers Broker Services at 1-866-405-7174.
- Fully insured groups: UnitedHealthcare is responsible for filing Form 720 and paying the fee for fully insured coverage. The company will submit the required payment by July 31. UnitedHealthcare customers do not need to take any action.
 - Important: Fully insured customers with ASO health reimbursement accounts and flexible spending accounts are required to pay the fee on each employee covered under the account.



Net Promoter Score Survey

UnitedHealthcare cannot improve, grow, or lead the industry without listening to the voice of its customers and brokers. The Employer Net Promoter Score (NPS) Survey and the annual Broker NPS Survey will be distributed to Public Sector, Key Accounts, and Small Business fully insured and self-funded (ASO) customers and brokers beginning July 8th. The surveys will remain open for completion through August 3rd. UnitedHealthcare will target nearly 80,000 customers and over 32,000 brokers nationally to participate in this NPS Survey. We encourage you to respond to this quick survey if you should receive it, and encourage your clients to respond as well.

NPS, a customer loyalty metric developed by Fred Reichheld, Bain & Company and Satmetrix in 2003, is used by many major companies around the world. The survey seeks to measure the loyalty that exists between a company and customers through one ultimate question: "How likely are you to recommend us?" Customers that are extremely likely to recommend a company are considered "Promoters;" customers that are not likely to recommend are considered "Detractors." The difference between the proportion of Promoters and Detractors in the population yields the NPS.

All Savers Virtual Training.

All Savers® Alternate Funding plans help give your small business clients more choices. Like multiple plan designs, wellness programs and alternate funding—designed to help employers find the right balance between managing costs and offering affordable, quality medical benefits.

Learn more through online training.

In 5 short sessions,*you'll learn about All Savers Alternate Funding product components, rates, renewals, reporting and wellness capabilities. You can easily access these training presentations 24/7 from anywhere. Each session takes just 10 to 15 minutes to complete. **Choose from:**

- What Is Alternate Funding?
- Eligibility, Quoting and Taxes
- Real Appeal® and Wellness Programs
- All Savers Employer Monthly Reporting
- All Savers Alternate Funding DocuSign Training Guide



New York rate filings: Initial notices mailing in June

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- Oxford Health Insurance, Inc. Off-Marketplace small groups
- Oxford Health Insurance, Inc. Off-Marketplace small group subscribers
- Oxford Health Insurance, Inc. On-Marketplace small groups
- Oxford Health Insurance, Inc. On-Marketplace small group subscribers
- UnitedHealthcare Insurance Company of New York, Inc. Off-Marketplace small groups
- UnitedHealthcare Insurance Company of New York, Inc. Off-Marketplace small group subscribers
- <u>UnitedHealthcare Insurance Company of New York, Inc. Off-Marketplace</u> <u>conversion plan subscribers</u>
- UnitedHealthcare of New York, Inc. On-Marketplace individual plan subscribers

The initial notice informs customers and subscribers (certificate and policy holders) of a community-rated product (e.g., individual subscribers, small groups, small group subscribers) about a health insurance company's application with the New York State Department of Financial Services for a rate adjustment. Impacted groups and subscribers will be sent a second notice with the approved rate adjustment 60 days prior to their 2021 renewal dates.

Please familiarize yourself with these notices should your customers have questions.

Con't on next page



New York rate filings: Initial notices mailing in June con't

More information

More information is available in the form of a narrative summary and a numerical summary. Impacted groups can view the summaries at:

- Oxford small groups: oxfordhealth.com > Employers > Messages

Subscribers can view the summaries on their member website, at the address shown on their health plan ID card:

- myuhc.com > Legal > Required State Notices > New York
- <u>oxfordhealth.com</u> > Members > Messages

More information also can be found on the New York Department of Financial Services' website.

If you have questions, please contact your UnitedHealthcare representative.

Employer eServices® 3rd Quarter training

This class is designed for policies with over 100 eligible employees.

Looking for an easier way to administer your UnitedHealthcare benefits?

Whether you need to make an eligibility change, complete open enrollment changes in real time, submit an online payment or want financial and claims data reports to help you make informed decisions about your health care benefits, UnitedHealthcare's Employer eServices is there to help you streamline your benefits administration.

This 60-minute introductory training session is designed to complement online tutorials, quick reference guides and Help, you can find within Employer eServices. **Instructor Led Webcast Training Schedule** for Groups with over 100 eligible employees

| DATE | TIME | REGISTRATION |
|-------------------------|------------------|-----------------|
| Friday, July 10, 2020 | 11:00 AM Eastern | <u>Register</u> |
| Tuesday, July 21, 2020 | 1:00 PM Eastern | Register |
| Monday, Aug. 3, 2020 | 11:00 AM Eastern | Register |
| Wednesday, Aug.19, 2020 | 2:00 PM Eastern | <u>Register</u> |
| Thursday, Sept. 3, 2020 | 1:00 PM Eastern | Register |
| Tuesday, Sept. 22, 2020 | 1:00 PM Eastern | Register |

To Register:

Please click on the links above or register for the webcast via the training link on the EeS website.



Specialty Updates

A vision plan that's more than an exam and eyewear benefit.

We provide numerous valuable planfeatures and network choices for employees.

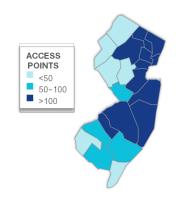
Enhanced maternity and pediatric benefits.

Vision changes during pregnancy and throughout a child's school years are common, so we've added more coverage without adding more cost.

Two eye exams are covered each plan year for mothers-to-be and children up to age 13. If their prescription changes 0.5 diopter or more, a new pair of eyeglasses are also covered. Copays apply.

A large, balanced network locally and nationwide.1

- · 106,500 access points nationallyand growing. Our vision network has doubled in just 7 years.
- · 977 private and 1,166 retail access points in New Jersey, plus access to online providers Warby Parker and GlassesUSA.com
- · 94.8% of New Jersey members chose a network vision provider in 2019.2



48 of the top 50 vision retailers,3 with a wide variety of price points.

WARBY PARKER















UnitedHealth Group is invested in New Jersey.4 Employees:

4.873

Offices:

Members:

Annual community investment:

Annual financial investment: \$781M

Customers can save even more when they bundle their plans.¹



Help customers get a 5% second year rate cap when they add a dental plan by December 31st, 2020.

The guidelines:

Effective dates are January 1, 2019 – December 31, 2020.



- Group size 2 100 eligible lives.
- Offer not available to groups situs in RI, WI, WA, FL (2-50), ACEC groups.

Earn big smiles

with guaranteed dental rates.

Specialty Updates

See more health plan savings with uBundle for groups of 51 plus lives in New Jersey



As a fully insured customer you can save up to 4 percent on medical premiums when bundling your United Healthcare medical plan with UnitedHealthcare dental, vision, life, disability and supplemental health plans. Bundling also helps simplify the administrative experience and provides your employees with a more competitive benefits package.



^{*}For new business effective Jan. 1, 2019 or later. Ask for details.

Add to that simpler administration and dedicated support — plus **Bridge2Health**® integration, which gathers actionable data to close gaps in care, reduce costs and improve productivity.



Dental 11M+ members² 104K+ unique network providers2



Vision 19M+ members² 100K+ network private practice and retail chains2



Life, Disability and **Supplemental Health** 1.5M+ members² 20+ years of experience²

Subject to uBundle rules, coverage and participation requirements, uBundle and certain specialty plans may not be available in all states or for all group sizes. Components subject to change. Ask your UnitedHealthcare representative for details. UnitedHealthcare internal membership and network reports, October 2018.